

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000042254

Entity Name: CCVM, LLC

FILED  
Feb 12, 2007  
Secretary of State

**Current Principal Place of Business:**

1101 SW 122 AVE  
PLANTATION, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1101 SW 122 AVE  
PLANTATION, FL 33323

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAVENDER, JOEL R ESQ  
507 SOUTHEAST 11TH COURT  
FORT LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NARA, SREENIVAS  
Address: 1101 SW 122 AVE  
City-St-Zip: PLANTATION, FL 33323

Title: MGRM ( ) Delete  
Name: CAUDILL, JEFFREY  
Address: 1532 TRALEE COURT NORTH  
City-St-Zip: JACKSONVILLE, FL 32221

Title: MGRM ( ) Delete  
Name: NARA, VENKATESH  
Address: 9820 SOUTHWEST 4TH STREET  
City-St-Zip: PLANTATION, FL 33324

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: NARA, SREENIVAS MD  
Address: 1101 SW 122 AVE  
City-St-Zip: PLANTATION, FL 33323

Title: MGRM (X) Change ( ) Addition  
Name: CAUDILL, JEFFREY MD  
Address: 1532 TRALEE COURT NORTH  
City-St-Zip: JACKSONVILLE, FL 32221

Title: MGRM (X) Change ( ) Addition  
Name: NARA, VENKATESH MD  
Address: 6721 NORTH COCOPAS ROAD  
City-St-Zip: TUSCON, AZ 85718

Title: MGRM ( ) Change (X) Addition  
Name: NAGARAJ, BINA MD  
Address: 1101 NW 122 AVE  
City-St-Zip: PLANTATION, FL 33323

Title: MGRM ( ) Change (X) Addition  
Name: NARA, REBECCA P MD  
Address: 6721 NORTH COCOPAS ROAD  
City-St-Zip: TUSCON, AZ 85718

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JEFFERY CAUDILL

MGRM

02/12/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date